

Equalities Comprehensive Impact Assessment

Reference: ECIA470266906

Submitted: 07 December 2022 17:34 PM

Executive summary

Title of policy / decision: Adult Social Care Discharge Fund 2022/23

Policy / decision type: Cabinet Member Action (CMA)

Overview of policy / decision: To agree plans between Essex County Council (ECC) and NHS integrated care boards (ICBs) for using the Winter Discharge Fund to support Essex residents and the Essex care market through winter.

In September 2022, the then Secretary of State for Health announced a £500m winter discharge fund for health and social care. Allocations to local authorities and NHS integrated care boards were announced on 16 November 2022 and further guidance published on 18 November 2022. Local areas need to submit plans to NHSE for spending the fund within 4 weeks of publication of the guidance (by 16 December).

What outcome(s) are you hoping to achieve?: Thousands of Essex residents and their carers rely on health and care services to support them. By working more closely with partners in the NHS, we can provide services in a more joined-up way. Doing this well can then lead to better outcomes for residents across Essex and support people to be discharged from hospital as quickly and as safely as possible.

This decision supports the Council's ambitions in Everyone's Essex to support people to be healthy, to address health inequalities, to support people to be independent and to level-up health outcomes. This decision also supports the Council's levelling-up white paper ambitions and provides additional capacity to support the most vulnerable people and communities in Essex.

Executive Director responsible for policy / decision: Nick Presmeg (Adult Social Care (DASS))

Cabinet Member responsible for policy / decision: John Spence (Health and Adult Social Care)

Is this a new policy / decision or a change to an existing one?: New policy / decision

How will the impact of the policy / decision be monitored and evaluated?: We are required to report on activity and number of beneficiaries on a fortnightly basis to DHSC. In addition the Government has issued guidance that local areas will be judged on how they use funding in a way that makes a positive difference to the following metrics;

the number of care packages purchased for care homes, domiciliary care and intermediate care (to be collected via a new reporting template);

the number of people discharged to their usual place of residence (existing BCF metric);

the absolute number of people 'not meeting criteria to reside' (and who have not been discharged);

the number of 'Bed days lost' to delayed discharge by trust (from the weekly acute sitrep); and

the proportion (%) of the bed base occupied by patients who do not meet the criteria to reside, by trust.

Will this policy / decision impact on:

Service users: Yes

Employees: Yes

Wider community or groups of people: No

What strategic priorities will this policy / decision support?: Health, Independence and Wellbeing for All Ages

Which strategic priorities does this support? - Health: Healthy lifestyles, Promoting independence, Place based working, Carers, Levelling up health

What geographical areas of Essex will the policy / decision affect?: All Essex

Digital accessibility

Is the new or revised policy linked to a digital service (website, system or application)?: No

Equalities - Groups with protected characteristics

Age

Nature of impact: Positive

Extent of impact: High

Disability - learning disability

Nature of impact: Positive

Extent of impact: High

Disability - mental health issues

Nature of impact: Positive

Extent of impact: High

Disability - physical impairment

Nature of impact: Positive

Extent of impact: High

Disability - sensory impairment

Nature of impact: Positive

Extent of impact: High

Sex

Nature of impact: None

Gender reassignment

Nature of impact: None

Marriage / civil partnership

Nature of impact: None

Pregnancy / maternity

Nature of impact: None

Race

Nature of impact: None

Religion / belief

Nature of impact: None

Sexual orientation

Nature of impact: None

Rationale for assessment, including data used to assess the impact: The fund will be used to support additional capacity in the health and care system to support faster discharge of adults. This includes:

- Additional Approved Mental Health Practitioner capacity over the winter months with a specific focus on triage and signposting to divert the request for a Mental Health Act assessment.
- Investment in care workforce to support providers to recruit and retain workers and pay/reward workers during the winter period.
- Additional therapy capacity to support flow through home to assess and the reablement pathway.
- additional capacity in domiciliary care.

The schemes have been agreed with the NHS and through consultation with partners through local alliances. They are based on the pressures the system faces over winter and current capacity challenges. In Essex, there have been challenges around domiciliary care capacity in some areas, particularly in the Braintree and Tendring districts, although we have made significant progress in recent months at reducing those capacity challenges. There are also capacity challenges around meeting complex care needs in some areas. Short-term services after leaving hospital (such as reablement) can help people to recover and regain their strength and independence but there have been challenges around the ability of current service provision to meet demand. Demand for mental health services has been high since the pandemic and there have been challenges in securing provision for more complex cases. Finally, the health and care workforce is stretched in the face of growing and high demand and the care sector has lost 2% of its workforce over the last 12 months (Skills for Care data).

Nationally we know that there is increased prevalence and acuity of mental health presentations in the wake of the pandemic. National adult acute bed MH occupancy has been over 95% since February 2022, and has ranged between 95-97% for much of the summer. This is well above the levels deemed “safe” for systems (which is 85-90%).

The high adult acute MH bed occupancy levels are in part driven by rising lengths of stay and beds occupied by those who are “clinically ready for discharge” i.e. when the multidisciplinary team (MDT) has concluded that the person does not require any further assessments, interventions and/or treatments, which can only be provided in the current inpatient setting.

- o The average length of stay for adults in acute mental health beds has been rising steadily, from just above 40 days in August 2021 to over 44 days in July 2022 (latest available data – internal only).

- o At the end of July over 22% of working age adults and older adults were in hospital for more than 60 or 90 days respectively (published by NHSD).

- o According to the latest data, the percentage of adult acute mental health beds occupied by people who are clinically ready for discharge is ~ 7% (~560 people a day) – internal data

- o In older adult acute mental health inpatient settings, the percentage of beds occupied by people who are clinically ready for discharge has been ~12% in recent weeks (~430 people a day) – internal data

Delayed discharges and long lengths of stay are preventing people who urgently need hospital admission to receive the care they need locally, contributing to increasing numbers of people with MH needs spending over 12 hours in A&E. 12hr MH waits have increased steadily from 5% in April 2021 to 17% in July 2022, despite the

overall numbers of MH attendances to A&E remaining fairly stable since 2019 at ~3% of all attendances (internal data).

Lack of access to a local bed also results in high numbers of Out of Area Placements, which result in poorer patient outcomes, experience and high costs to the NHS. Despite significant progress to reduce the number of new people sent out of area each month (almost halved between winter 2020 and spring 2022 – published data), in recent months further reductions have not been achieved.

What actions have already been taken to mitigate any negative impacts:

Levelling up - Priority areas & cohorts

Children and adults with SEND, learning disabilities or mental health conditions (taking an all-age approach)

Nature of impact: None

Children on Free School Meals

Nature of impact: None

Working families

Nature of impact: None

Young adults (16-25 who have not been in education, training or employment for around 6-12 months)

Nature of impact: Positive

Extent of impact: Low

Harlow

Nature of impact: Positive

Extent of impact: Low

Jaywick and Clacton

Nature of impact: Positive

Extent of impact: High

Harwich

Nature of impact: Positive

Extent of impact: High

Basildon (Town) housing estates

Nature of impact: Positive

Extent of impact: Low

Canvey Island

Nature of impact: Positive

Extent of impact: Low

Colchester (Town) - Housing Estates

Nature of impact: None

Rural North of the Braintree District

Nature of impact: Positive

Extent of impact: High

Rationale for assessment, including data used to assess the impact: The national guidance on the use of the fund rules out spend on children's discharge.

While the fund will benefit residents across Essex it is likely that the greatest impact will be in areas where we have had higher levels of unmet need, such as Tendring and Braintree. The fund will target gaps in capacity at a place level including the provision of additional domiciliary care round in Braintree and 3 additional at Parkview residential care home in Witham.

What actions have already been taken to mitigate any negative impacts:

Equalities - Inclusion health groups and other priority groups

Refugees / asylum seekers

Nature of impact: None

Homeless / rough sleepers

Nature of impact: None

Offenders / ex-offenders

Nature of impact: None

Carers

Nature of impact: Positive

Extent of impact: High

Looked after children

Nature of impact: None

Veterans

Nature of impact: None

People who are unemployed / economically inactive

Nature of impact: None

People on low income

Nature of impact: None

Working families

Nature of impact: None

Rationale for assessment, including data used to assess the impact: The UK Census data for 2011 identified the number of adults providing unpaid care in Essex was 146,211. However, in 2015 Carers UK said in its 'Valuing Carers' report that it estimates there are now probably 153,926 of you in Essex. Engagement for the Essex Carers strategy identified the importance of information, advice and guidance for the carer. Many of the schemes proposed to support hospital discharge in the decision paper will work with the carer as well as the individual due to be discharged. For example, social prescribing in acute settings and virtual wards to reduce discharge delays where these are related to support available outside of hospital by connecting people to support in their communities and helping coordinate that support. In addition, there is the extension of pathway light – providing wrap-around voluntary support on day of discharge to reduce need for care or reablement and reduce readmission.

What actions have already been taken to mitigate any negative impacts:

Equalities - Geographical Groups

People living in areas of high deprivation

Nature of impact: None

People living in rural or isolated areas

Nature of impact: Positive

Extent of impact: High

People living in coastal areas

Nature of impact: Positive

Extent of impact: High

People living in urban or over-populated areas

Nature of impact: None

Rationale for assessment, including data used to assess the impact: While the fund will benefit residents across Essex it is likely that the greatest impact will be in areas where we have had higher levels of unmet need, such as Tendring and Braintree. The fund will target gaps in capacity at a place level including the provision of additional domiciliary care round in Braintree and 3 additional at Parkview residential care home in Witham.

What actions have already been taken to mitigate any negative impacts:

Families

Family formation (e.g. to become or live as a couple, the ability to live with or apart from children)

Nature of impact: None

Families going through key transitions e.g. becoming parents, getting married, fostering or adopting, bereavement, redundancy, new caring responsibilities, onset of a long-term

health condition

Nature of impact: None

Family members' ability to play a full role in family life, including with respect to parenting and other caring responsibilities

Nature of impact: None

Families before, during and after couple separation

Nature of impact: None

Families most at risk of deterioration of relationship quality and breakdown

Nature of impact: None

Rationale for assessment, including data used to assess the impact: The fund is focussed on hospital discharge for adults

What actions have already been taken to mitigate any negative impacts:

Climate

Does your decision / policy involve elements connected to the built environment / energy?: No

Does your decision / policy involve designing service provision and procurement to minimise freight and staff travel and enable use of active and public transport options?: No

Does your decision / policy involve elements connected to waste?: No

Action plan to address and monitor adverse impacts

Does your ECIA indicate that the policy or decision would have a medium or high adverse impact on one or more of the groups / areas identified?: No

Details of person completing the form

I confirm that this has been completed based on the best information available and in following ECC guidance: I confirm that this has been completed based on the best information available and in following ECC guidance

Date ECIA completed: 07/12/2022

Name of person completing the ECIA: Will Herbert

Email address of person completing the ECIA: will.herbert@essex.gov.uk

Your function: Adult Social Care

Your service area: Integration and Partnerships

Your team: Integration and Partnerships

Are you submitting this ECIA on behalf of another function, service area or team?: No

Email address of Head of Service: peter.fairley@essex.gov.uk